#### Case 17-04713 Doc 1 Filed 02/17/17 Entered 02/18/17 12:54:08 Desc Main Page 1 of 61 Document

Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of Illinois		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS  FEB 17 2017
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11	JEFFREY P. ALLSTEADT, CLERK
	Chapter 12 Chapter 13	☐ Check if this is an amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

THE THE THE

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

B	e as complete and accurate as formation. If more space is nee known). Answer every question	possible. If two married people are filing together, both a ded, attach a separate sheet to this form. On the top of a	are equally responsible for supplying correct any additional pages, write your name and case numbe
7	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	JERMAINE	
	identification (for example, your driver's license or	First name	First name
	passport). Bring your picture	Middle name POLK	Middle name
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
_	Only the least A divise of		
3.	Only the last 4 digits of your Social Security	xxx - xx - 1 9 3 1	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx
		the state of the state of	2 - 4 4 - 4

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Đ	ebtor 1	JERMAINE	POLK	Construction of
		First Name Middle 5	lasne Last Name	Case number (# known)
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	and Em	siness names ployer cation Numbers ou have used in	Thave not used any business names or EINs.  Thorough	☐ I have not used any business names or EINs.
	the last	-	Business name	Business name
Include trade names and doing business as names			Business name	Business name
			1-1958223	EIN
			EIN	EIN
5.	Where y	ou live		If Debtor 2 lives at a different address:
			14109 EDBROOKE ST	
			Number Street	Number Street
			RIVERDALE IL 60827	
			City State ZIP Code	City State ZIP Code
			COOK	Constitution
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
			Number Street	Number Street
			P.O. Box	P.O. Box
			City State ZIP Code	City State ZIP Code
6.		are choosing	Check one:	Check one:
	bankrupt	tcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
			☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

6.

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D	ebtor 1 JERMAINE First Name Middle No.		OLK	ė	Case number (if	known)
	Part 2: Tell the Court Abo	ut Your I	3ankru	ptcy Case		
7.	The chapter of the	Check of	one. (For	a brief description of each, see <i>Not</i> Form 2010)). Also, go to the top of p	ice Required by 1	U.S.C. § 342(b) for Individuals Filing
	Bankruptcy Code you are choosing to file	☑ Cha		onn 2010)). Also, go to the top of p	Jage Tano Check (	пе арргорнате вох.
	under		ipter 11			
			ipter 12			
			•			
		<b>□</b> Cha	pter 13			
8.	How you will pay the fee	loca you sub with I ne App	I court if rself, you mitting you a pre-ped to polication	for more details about how you rund way pay with cash, cashier's of the cash o	may pay. Typical check, or money our attorney may but choose this op Fee in Installment	order. If your attorney is pay with a credit card or check oftion, sign and attach the ents (Official Form 103A).
9.	Have you filed for	By la less pay	aw, a ju than 15 the fee	dge may, but is not required to, 50% of the official poverty line th	waive your fee, a at applies to you his option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ar family size and you are unable to east fill out the Application to Have the with your petition.
٠.	bankruptcy within the		Brancia.			
	last 8 years?	La res.	DISTRICT	When	MM / DD / YYYY	Case number
			District	When	184 55 (2004)	Case number
			District	When		Case number
					MM / DD / YYYY	- Cade Harrison
10	Are any bankruptcy	☑ No				
	cases pending or being		Debtor			Relationship to you
	filed by a spouse who is not filing this case with			When		Case number, if known
	you, or by a business partner, or by an affiliate?				MM / DD / YYYY	
			Debtor			Relationship to you
			District	When	MM / DD / YYYY	Case number, if known
					19719 / DD / 1111	
11.	Do you rent your residence?	No. Yes.	Go to lin Has you residen	ır landlord obtained an eviction judg	ment against you a	and do you want to stay in your
			☐ No.	Go to line 12.		
				. Fill out <i>Initial Statement About an E</i> bankruptcy petition.	Eviction Judgment	Against You (Form 101A) and file it with

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De	ebtor 1	JERMAINE First Name Middle Na		POLK	Case	number (ä known	2}
		PRINCIPLE MARCINE MAN	ne .	Last Name			
P	art 31 F	leport About Any	Busines	ses You Own as a S	ole Proprietor		
12		a sole proprietor	🛭 No.	Go to Part 4.			
	ot any t busines	ull- or part-time s?	☐ Yes	. Name and location of b	ousiness		
	business individual	oprietorship is a you operate as an , and is not a legal entity such as		Name of business, if any			
	•	tion, partnership, or		Number Street			
	If you have sole prop	re more than one rietorship, use a sheet and attach it		NEW TOTAL PARTY WAS ARRESTED AND ADDRESS OF THE PARTY OF		<del></del>	
	to this pe			City		State	ZIP Code
				Charlette and a sister	Andrew W		
					box to describe your business ess (as defined in 11 U.S.C. §		
					Estate (as defined in 11 U.S.C		,
				_	fined in 11 U.S.C. § 101(53A))		,
					(as defined in 11 U.S.C. § 101		
				☐ None of the above	•		
13,	Chapter Bankrup are you debtor? For a defination business	filing under 11 of the tcy Code and a small business hition of small febtor, see § 101(51D).	can set most reany of the No.	appropriate deadlines. If cent balance sheet, state hese documents do not e	f you indicate that you are a sr ement of operations, cash-flow exist, follow the procedure in 1 apter 11.	mall business  statement, a  1 U.S.C. § 1	small business debtor so that it is debtor, you must attach your and federal income tax return or if 116(1)(B).
		3(0.2)	Yes.		er 11 and I am a small busines	s debtor acc	ording to the definition in the
Ρæ	rt 4: R	port if You Own o	or Have	Any Hazardous Prop	perty or Any Property Th	at Needs I	mmediate Attention
14.	Do you o	wn or have any	<b>⊘</b> No				
		that poses or is o pose a threat		What is the hazard?			
	of immin identifial						
	Or do yo property	u own any that needs te attention?		If immediate attention i	is needed, why is it needed? _	·	
	perishable that must L	le, do you own goods, or livestock ee fed, or a building urgent repairs?				**************************************	
				Where is the property?	Number Street	***	
					City		State ZIP Code

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Debtor 1 JERMAINE First Name Middle Nam	POLK ne Lass Name	Case number (if known)	2000-000 tankan tankan tankan
Part 5: Explain Your Effort	s to Receive a Briefing About Credit	Counseling	
Is. Tell the court whether you have received a briefing about credit counseling.  The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	About Debtor 1:  You must check one:  I received a briefing from an approve counseling agency within the 180 defiled this bankruptcy petition, and I received a briefing from an approve counseling agency within the 180 defiled this bankruptcy petition, but I decertificate of completion.  Within 14 days after you file this bankruptcy petition, but I decertificate of completion.  Within 14 days after you file this bankruptcy bettien, but I decertificate of completion.  I certify that I asked for credit couns services from an approved agency, unable to obtain those services duri days after I made my request, and excircumstances merit a 30-day tempor of the requirement.  To ask for a 30-day temporary waiver or requirement, attach a separate sheet e what efforts you made to obtain the brie you were unable to obtain it before you bankruptcy, and what exigent circumstar required you to file this case.  Your case may be dismissed if the cound dissatisfied with your reasons for not re briefing before you filed for bankruptcy. If the court is satisfied with your reason still receive a briefing within 30 days after line of the property of the court is satisfied with your reason still receive a briefing within 30 days after line of the property of the court is satisfied with your reason still receive a briefing within 30 days after line of the property of the court is satisfied with your reason still receive a briefing within 30 days after line of the property of the court is satisfied with your reason still receive a briefing within 30 days after line of the property of the certificate of the property of the certificate of the property of the line of the lin	About Debtor 2 (Spouse Only in a Joint Cardit ys before I eceived a briefing from an approved counseling agency within the 180 days filed this bankruptcy petition, and I received a brieficate of completion.  Attach a copy of the certificate and the paplan, if any, that you developed with the accurseling agency within the 180 days filed this bankruptcy petition, but I do accrtificate of completion.  Within 14 days after you file this bankrupt you MUST file a copy of the certificate and plan, if any.  I certify that I asked for credit counseling services from an approved agency, but unable to obtain those services during days after I made my request, and exig circumstances merit a 30-day temporar of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet expl what efforts you made to obtain the briefing you were unable to obtain it before you file bankruptcy, and what exigent circumstance required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiver you file.  So you must attach a briefing within 30 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.	credit s before I ceived a ayment agency. credit s before I not have a cry petition, d payment ng t was the 7 cent ry waiver he laining ng, why ed for ces s iving a you must
	You must file a certificate from the appr agency, along with a copy of the payme developed, if any. If you do not do so, y may be dismissed. Any extension of the 30-day deadline is only for cause and is limited to a maxim	you must file a certificate from the approving the plan you agency, along with a copy of the payment developed, if any. If you do not do so, you may be dismissed.  Granted Any extension of the 30-day deadline is granted	ed plan you r case ranted
	days.  I am not required to receive a briefing credit counseling because of:	days.  about	bout
	Incapacity. I have a mental illness deficiency that makes	or a mental Incapacity. I have a mental illness or deficiency that makes me	r a mental e

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

☐ Active duty. I am currently on active military

Disability.

incapable of realizing or making

rational decisions about finances.

My physical disability causes me

to be unable to participate in a briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

incapable of realizing or making

Disability.

rational decisions about finances.

My physical disability causes me to be unable to participate in a

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Det	JERMAINE First Name Moddle Nam	POLK ne Last Name	Case number (# km	own)
	First Name Middle Nar	ne Last Name		
	163 Answer These Que	stions for Reporting Purpo	neae	•
	What kind of debts do you have?	as "incurred by an individ	arily consumer debts? Consumer deb lual primarily for a personal, family, or hou	sehold purpose."
	•	<ul><li>No. Go to line 16b.</li><li>✓ Yes. Go to line 17.</li></ul>		
		16b. Are your debts prima money for a business or	arily business debts? Business debts investment or through the operation of the	are debts that you incurred to obtain business or investment.
		No. Go to line 16c.	•	
		Yes. Go to line 17.	ou owe that are not consumer debts or but	ninona dobta
		roc. Otale the type of debts yo	ou owe that are not consumer debts or but	siress deb(s.
	Are you filing under Chapter 7?	☐ No. I am not filing under (	Chapter 7. Go to line 18.	
	Do you estimate that after	Yes. I am filing under Chap	pter 7. Do you estimate that after any exer ses are paid that funds will be available to	npt property is excluded and
	any exempt property is excluded and	M No	ses are paid triat tutios will be available to	ashbate to ansecured creditors?
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes		
	How many creditors do	<b>2</b> 1-49	1,000-5,000	25,001-50,000
	you estimate that you owe?	☐ 50-99 ☐ 100-199	5,001-10,000 10,001-25,000	50,001-100,000  More than 100,000
		200-999		
	How much do you estimate your assets to	<b>2</b> \$0-\$50,000 <b>□</b> \$50,001-\$100,000	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion
	be worth?	\$100,001-\$500,000	\$50,000,001-\$100 million	□ \$10,000,000,001-\$50 billion
		□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	More than \$50 billion
	How much do you estimate your liabilities	<b>△</b> \$0-\$50,000 <b>□</b> \$50,001-\$100,000	\$1,000,001-\$10 million \$10,000,001-\$50 million	<b>以</b> \$500,000,001-\$1 billion <b>以</b> \$1,000,000,001-\$10 billion
1	to be?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
ΕŢ	1974. Sign Below	3500,003-37 AMHOR	<b>4100,000,001-\$300</b> (19)	■ More trail \$50 billion
or	you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and
		If I have chosen to file under C of title 11, United States Code, under Chapter 7.	hapter 7, I am aware that I may proceed, i I understand the relief available under ear	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
			nd I did not pay or agree to pay someone vill and read the notice required by 11 U.S.C	
		I request relief in accordance w	with the chapter of title 11, United States C	ode, specified in this petition.
			atement, concealing property, or obtaining sult in fines up to \$250,000, or imprisonme and 3571.	
		Signature of Debtor 1	Signature	of Debtor 2
		Executed on	Executed	
		EXECUTED OIL		OII

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Debtor 1	<b>JERMAINE</b>	POLK	Case number (if known)			
	First Name Middle Nam	ie Last Name			<del></del>	
	attorney, if you are ted by one	to proceed under Chapter 7, 11 available under each chapter for	named in this petition, declare that I have inf , 12, or 13 of title 11, United States Code, ar or which the person is eligible. I also certify t c. § 342(b) and, in a case in which § 707(b)(4	nd have e: hat I have	kplaine deliver	d the relief ed to the debtor(s)
by an atte	e not represented orney, you do not ile this page.	knowledge after an inquiry that	the information in the schedules filed with the	e petition	is incor	rect.
		Signature of Attorney for Debtor	Date	MM /	DD	/ YYYY
		Printed name				
		Firm name		**************************************		
		Number Street		***************************************		
						Vanish and the state of the sta
		City	State	ZIP Code		
		Contact phone	Email address			
		Bar number	State	<u>.</u>		

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Debtor 1	JERMAINE	POLK	Case number (# known)
	First Name Middle Name	Lost Name	Case Harriber (FADINIT)
bankrupt attorney	f you are filing this ccy without an	should understand the themselves successfo	an individual, to represent yourself in bankruptcy court, but you at many people find it extremely difficult to represent ully. Because bankruptcy has long-term financial and legal re strongly urged to hire a qualified attorney.
an attorn	e represented by ey, you do not ile this page.	technical, and a mistake dismissed because you hearing, or cooperate wi firm if your case is select	ust correctly file and handle your bankruptcy case. The rules are very or inaction may affect your rights. For example, your case may be did not file a required document, pay a fee on time, attend a meeting or the the court, case trustee, U.S. trustee, bankruptcy administrator, or audit ed for audit. If that happens, you could lose your right to file another otections, including the benefit of the automatic stay.
		court. Even if you plan to in your schedules. If you property or properly clair also deny you a discharg case, such as destroying cases are randomly audi	perty and debts in the schedules that you are required to file with the pay a particular debt outside of your bankruptcy, you must list that debt do not list a debt, the debt may not be discharged. If you do not list in it as exempt, you may not be able to keep the property. The judge can e of all your debts if you do something dishonest in your bankruptcy or hiding property, falsifying records, or lying. Individual bankruptcy led to determine if debtors have been accurate, truthful, and complete.
		hired an attorney. The co successful, you must be Bankruptcy Procedure, a	ut an attorney, the court expects you to follow the rules as if you had ourt will not treat you differently because you are filing for yourself. To be familiar with the United States Bankruptcy Code, the Federal Rules of not the local rules of the court in which your case is filed. You must also exemption laws that apply.
		Are you aware that filing consequences?	for bankruptcy is a serious action with long-term financial and legal
		☐ No ❷ Yes	
		inaccurate or incomplete,	uptcy fraud is a serious crime and that if your bankruptcy forms are you could be fined or imprisoned?
		☐ No ☑ Yes	
		<ul><li>☑ No</li><li>☑ Yes. Name of Person_</li></ul>	ay someone who is not an attorney to help you fill out your bankruptcy forms?
		Attach Bankruptcy	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
		have read and understoo	rledge that I understand the risks involved in filing without an attorney. I d this notice, and I am aware that filing a bankruptcy case without an b lose my rights or property if I do not properly handle the case.
	3	< Jermanne	Bik x
		\$ignature of Debtor 1  Date	Signature of Debtor 2  Date
		MM / DD / Y	MM / DD / YYYY
		Cell phone	Contact phone  Cell phone

Email address

Email address

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:		}		
JERMAINE	POLK	I		
		****	Case No.	
Debtor (s)		ł	cuse ivo.	
		I	Chapter	7
		}		
		1		

#### List of Creditors

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POLK **JERMAINE** Debtor 1

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Fill in this information to identify your case:	
Debtor 1 JERMAINE POLK	]
First Name Middle Name Last Name  Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If known)	Check if this is an amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Cer	tain Statistical Information 12/15
Be as complete and accurate as possible. If two married people are filing together, information. Fill out all of your schedules first; then complete the information on the your original forms, you must fill out a new Summary and check the box at the top	nis form. If you are filing amended schedules after you file
Part 4: Summarize Your Assets	
	Your assets
	Value of what you own
Schedule A/B: Property (Official Form 106A/B)     A: Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	
	\$
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last p.</li> </ol>	age of Part 1 of Schedule D
<ol> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule</li> </ol>	s 15 1 2 1
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Sc/	hedule E/F
	Your total liabilities s 5 12
Part 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	11 2 - 2
Copy your combined monthly income from line 12 of Schedule I	\$ <u>4,030</u>
5. Schedule J: Your Expenses (Official Form 106J)	<u>\$ 4,050</u> <u>\$ 1,995</u>
Copy your monthly expenses from line 22c of Schedule J	s 1,495

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Deb	otor 1	JERMAINE	POLK	Case number (# known)
		First Name Middle Name	Las! Name	
Pa	rt 4:	Answer These Questic	ons for Administrative and Statist	ical Records
6.	Are you	u filing for bankruptcy und	ler Chapters 7, 11, or 13?	
	No. Yes		on this part of the form. Check this box ar	nd submit this form to the court with your other schedules.
7.	What ki	ind of debt do you have?		
			sumer debts. Consumer debts are those 11 U.S.C. § 101(8). Fill out lines 8-9g for s	"incurred by an individual primarily for a personal, statistical purposes. 28 U.S.C. § 159.
		or debts are not primarily of form to the court with your of		port on this part of the form. Check this box and submit
			ent Monthly Income: Copy your total cur 2B Line 11; <b>OR</b> , Form 122C-1 Line 14.	rent monthly income from Official
0	Conv. th	no following special category	ories of claims from Part 4, line 6 of Sc.	hadula E/E·
<b>9</b> .	Copy to	ie ronowing special catego	nies of Cialitis Holli Part 4, line 6 of 50	redule DF.
				Total claim
	From	Part 4 on Schedule E/F, co	opy the following:	
	9a. Don	nestic support obligations (C	opy line 6a.)	\$ 15, 12
	9b. Tax	es and certain other debts y	ou owe the government. (Copy line 6b.)	\$
	9c. Clai	ms for death or personal inju	ury while you were intoxicated. (Copy line	6c.) \$
	9d. Stud	dent loans. (Copy line 6f.)		\$
		gations arising out of a separity claims. (Copy line 6g.)	tration agreement or divorce that you did	not report as
	9f. Deb	ets to pension or profit-sharing	g plans, and other similar debts. (Copy lie	ne 6h.) + \$
	9g. <b>Tot</b> a	al, Add lines 9a through 9f.		s 15, I21

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Fill in this	s information to identify your case and this	s filing:		
Debtor 1	JERMAINE	POLK		
	First Name Middle Name	Last Name		
Debtor 2 (Spouse, if fi	iling) First Name Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the: Northern District of	Illinois		
Case numi	ber		ļ	Check if this is an
				amended filing
Offici	al Form 106A/B			
	Commence of the Architecture and Colored Archi			
Sch	edule A/B: Propert	<u>y</u>		12/15
category responsi	where you think it fits best. Be as completible for supplying correct information. If muranism and case number (if known). Answ	s. List an asset only once. If an asset fits in more sete and accurate as possible. If two married people ore space is needed, attach a separate sheet to this yer every question.  Land, or Other Real Estate You Own or Hav	are filing together, bo is form. On the top of a	th are equally
1. Do you	u own or have any legal or equitable intere	st in any residence, building, land, or similar propo	erty?	
	o. Go to Part 2.			
☐ Ye	s. Where is the property?	What is the property? Check all that apply.		
		☐ Single-family home	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
1.1.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	
		Condominium or cooperative     Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		☐ Land	\$	\$
		Investment property Timeshare	Describe the nature of	of your ownership
	City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		, , , , , , , , , , , , , , , , , , , ,
		Debtor 1 only		
	County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this it	em, such as local	
lf vou	own or have more than one, list here:	property identification number:	<u>, , , , , , , , , , , , , , , , , , , </u>	
,		What is the property? Check all that apply.	Do not deduct secured cla	
1.2.		Single-family home	the amount of any secure Creditors Who Have Clair.	d claims on Schedule D: ns Secured by Property.
1.2.	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		Land Investment property	\$	\$
	City State ZIP Code	Timeshare	Describe the nature of interest (such as fee	
	City State ZIP Code	Other	the entireties, or a life	
		Who has an interest in the property? Check one.		
		Debtor 1 only Debtor 2 only		
	County	Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		☐ At least one of the debtors and another	(see instructions)	, ,
		Other information you wish to add about this ite	m, such as local	

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Debtor	, JERMAINE	POLK		
CODIO		Last Name	number (# known)	
		What is the property? Check all that apply.	Do not deduct secured cl	
1.3		Single-family home	the amount of any secure Creditors Who Have Clair	
	Street address, if available, or other descript			, , ,
		Condominium or cooperative	entire property?	Current value of the portion you own?
		Manufactured or mobile home		•
		Land	\$	\$
		Investment property	Describe the mature	- <b>f</b>
	City State ZIP	Code Timeshare	Describe the nature of interest (such as fee	
		Other	the entireties, or a lif	
		Who has an interest in the property? Ch.	eck one.	
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	minumes property
			•	
		Other information you wish to add abou		
		property identification number:	THE RESERVE THE PROPERTY OF TH	
Add 1	the dollar value of the portion you owr	n for all of your entries from Part 1, including an	y entries for pages	¢
you	have attached for Part 1. Write that nu	mber here	·············	~
o you o	own, lease, or have legal or equitable in that someone else drives. If you lease a	interest in any vehicles, whether they are registed vehicle, also report it on Schedule G: Executory Co.	ered or not? Include any vehicles	3
Cars	, vans, trucks, tractors, sport utility ve			
Ø N				
3.1.	Make:	Who has an interest in the property? Che	DO HOL GOGGG SCORED CR	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	
	Year:	Debtor 2 only		
	<del></del>	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	entite property?	portion you own?
	Other information:			
		Check if this is community property (instructions)	see \$	\$
<b>H</b>	our or have more than and described	·		
•	own or have more than one, describe he	ere:  Who has an interest in the property? Che	ck one	
3.2.	Make:		On not deduct secured claim the amount of any secured	
	Model:	Debtor 1 only	Creditors Who Have Claim	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		-
	Other information:	Coheate Watter to come to	saa \$	\$
		Check if this is community property (sinstructions)	see *	7

Official Form 106A/B Schedule A/B: Property page 2

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**JERMAINE POLK** Debtor 1 Case number (if known)\_ Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No No Q Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one 42 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here

Middle Name

Document

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Debtor 1

**JERMAINE** 

First Name

**POLK** 

Case number (# known)\_\_\_\_

1170			ю
		Tab.	а.
		346	

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	W No Provide	1 000
	Yes. Describe Household Items	s 6,500
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No	
	Yes. Describe	\$
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	□ No	
	☐ Yes. Describe	\$
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	□ No	
	Yes. Describe	\$
		**************************************
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	□ No	
	Yes. Describe	\$
		<b>4</b>
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	Yes, Describe	S
		3
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	gold, silver	
	□ №	
	Yes. Describe	\$ 1,200
	Yes. Describe	1
13.	Non-tarm animais	
	Examples: Dogs, cats, birds, horses	
	□ No	
	Yes. Describe	\$
	Any other personal and household items you did not already list, including any health aids you did not list	
	□ No	
	Yes. Give specific	\$
	information	<b>-</b>
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	s 7.700
	for Part 3. Write that number here	°-4-155

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Debtor 1

JERMAINE	POLK	Casa Tumban III
		Case number (if known)

o you own or have a	ny legal or equitable interest in	any of the following?	Current value of the portion you own?  Do not deduct secured clain or exemptions.
B. Cash Examples: Money yo	ou have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition	
No Ves		Cash:	¢.
		Casil.	\$
	r similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each.  Institution name:	s.
	17.1. Checking account:		\$
	17.2. Checking account:		. \$
	17.3. Savings account:		\$
	17.4. Savings account:		ss
	17.5. Certificates of deposit:		- \$
	17.6. Other financial account:		- \$
	17.7. Other financial account:	***************************************	- \$ <u> </u>
	17.8. Other financial account:		· \$
	17.9. Other financial account:		\$
•	is, or publicly traded stocks is, investment accounts with brok Institution or issuer name:	erage firms, money market accounts	
			_ \$
			- \$

☑ No	Name of entity:	% of owner	rship:	
Yes. Give specific		0%	%	\$
information about them		0%	%	\$
		0%	_%	\$

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Deb	tor 1 JERM		Hiddle Name Last Name	OLK	Case number (if known)	
	1.1664.75年	ıe	stigge Name Last Manie			
20. <b>(</b>	Sovernment and	i corpo	ate bonds and other nego	tiable and non-negotiable ins	truments	
ſ	vlegotiable instrui Von-negotiable in	ments in Istrumer	clude personal checks, cas its are those you cannot tra	hiers' checks, promissory notes, nsfer to someone by signing or o	and money orders. delivering them.	
	No Yes. Give spe		Issuer name:			
	information at them			<u></u>		\$
						\$ \$
É	Retirement or pe Examples: Interes			03(b), thrift savings accounts, or	other pension or profit-sharing plans	
	Yes. List each		Type of account: Institut	ion name:		
	account cops		401(k) or similar plan:			\$
			Pension plan:			\$
			IRA:			\$
			Retirement account:			\$
			Keogh:			\$
			Additional account:		4	\$
			Additional account:			\$
E	ecurity deposite four share of all e Examples: Agree companies, or other	unused ments w	deposits you have made so	that you may continue service o public utilities (electric, gas, wate	or use from a company er), telecommunications	
	₽ No					
(	Yes		Institution	name or individual:		
			Electric:	<u> </u>		\$
			Gas:			\$
			Heating oil:			\$
			Prepaid rent:			\$
			Telephone:			\$
			Water:			\$
			Rented furniture:			\$
			Other:			\$
വര ക	nnuition (A con	tract for	a neriodic navment of mone	y to you, either for life or for a n	umber of years)	
	No	adol IUI	и роново раутон от пов	y to you, outfor for the of for a fi	and a same	
	<b>)</b> Yes		Issuer name and description:			
						\$
						\$

Official Form 106A/B

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Debtor 1	JERMAINE	POLK	O constant of	
Deptor i	First Name Middle	Name Last Name	Case number (# known)	
		· · · · · · · · · · · · · · · · · · ·	m, or under a qualified state tuition program.	
26 U.S.	C. §§ 530(b)(1), 529A(	b), and 529(b)(1).		
	***************************************	Institution name and description. Separately	file the records of any interests.11 U.S.C. § 521(c)	):
				\$
				\$
		<u> </u>		\$
	equitable or future in able for your benefit	terests in property (other than anything list	ted in line 1), and rights or powers	
₩ No	able for your benefit			
	. Give specific			
	mation about them			\$
				* ************************************
		arks, trade secrets, and other intellectual pa mes, websites, proceeds from royalties and lic	¥ =	
<b>□</b> No				
	. Give specific			
	mation about them			\$
		her general intangibles	Barre Process Control of	
	es: building permits, ex	clusive licenses, cooperative association hold	ings, liquor licenses, professional licenses	
© No	0:			
	Give specific mation about them			\$
				T
Money or p	property owed to you	?		Current value of the
				portion you own? Do not deduct secured
				claims or exemptions.
28. Tax refu	inds owed to you			
No No				
Yes.	Give specific informati		Federal: \$	
	about them, including you already filed the re			
	and the tax years		Locat: \$	<u> </u>
			Local. Ø	
20 Eamily				
29. <b>Family</b> s Example		ım alimony, spousal support, child support, ma	sintenance, divorce settlement, property settlemen	t
<b>□</b> No	•	, , , , , , , , , , , , , , , , , , , ,		•
	Give specific informati	ion		
			Alimony:	\$
			Maintenance:	\$
			Support:	\$
			Divorce settlement:	\$
			Property settlement:	\$
30. Other ar	nounts someone owe	es you		
/	s: Unpaid wages, disa Social Security beni	bility insurance payments, disability benefits, s efits; unpaid loans you made to someone else	sick pay, vacation pay, workers' compensation,	
Y No				
Yes.	Give specific informati	on		

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Page 20 of 61 Document **JERMAINE POLK** Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **□** No ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value ... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue UP No Yes, Describe each claim..... 34 Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 1 No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list ☑ No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned OD No

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices M No Yes. Describe......

39. Office equipment, furnishings, and supplies

☐ Yes. Describe......

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Debtor 1	JERMAINE		POLK	Case number (# known)	
Depto: (	First Name	Middle Name	Last Name	Case Bullibel (# known)	
40. Machine	ery, fixtures, ec	quipment, supp	olies you use in business, and too	s of your trade	
☑ No					
	Describe		ere i sa a s		
	Describe				\$
41. Inventor	rv				
12 No	•				
Yes.	Describe				\$
					~ <u></u>
24.5	s in partnershi	ps or joint vent	tures		
No No					
Yes.	Describe	Name of entity:		% of ownership:	
		-		%	\$
				* .	
		***************************************	44-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		\$
				%	Э
43. Custome	er lists, mailing	lists, or other	compilations		
□ No					
	-	nclude person	ally identifiable information (as de	fined in 11 U.S.C. § 101(41A))?	
	☐ No				
	Yes. Descr	ibe			¢
					Ψ
44. Any bus No	iness-related [	property you as	d not already list		
	Give specific				
	mation				\$
					\$
					\$
		······································			\$
				***************************************	\$
					\$
			ries from Part 5, including any ent		\$
for Part	5. Write that n	umber here		→	
Part 6:				Property You Own or Have an Interest	in.
	If you own or	have an interes	st in farmland, list it in Part 1.		
/		y legal or equi	table interest in any farm- or comr	nercial fishing-related property?	
	Go to Part 7.				
₩ Yes.	Go to line 47.				
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
47. Farm an	imals				
Example	s: Livestock, po	ultry, farm-raise	ed fish		
No No					
	,.,.,,,				

Official Form 106A/B Schedule A/B: Property page 9

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Debtor 1	JERMAINE	POLK	Case number (# known)	
Debror I	First Name	Mixidie Name Last Name	Odd Handel (1874)	
48. Crops-	either growing	or harvested		
No No				
	s. Give specific ormation			\$
		ment, implements, machinery, fixtu	ures, and tools of trade	
∭ No ☐ Yes	S			
				\$
· ·	nd fishing suppl	lies, chemicals, and feed		
III No □ Yes	\$			
				\$
51. Any far	m- and commer	cial fishing-related property you dic	d not already list	
-	s. Give specific			
	ormation			\$
52. Add th	e dollar value of	all of your entries from Part 6, inch	uding any entries for pages you have attached	\$
tor Par	t 6. write that ht	Imber nere		
	l		and the state of t	
Part 7:	Describe A	II Property You Own or nav	re an Interest in That You Did Not List Above	
-		perty of any kind you did not alread country club membership	ty list?	
₩ No				\$
	s. Give specific			\$
1110	The state of the s			\$
		N. of		\$
54. <b>Add th</b> i	e dollar value of	all or your entries from Part 7. Write	te that number here→	
Part 8:	List the To	tals of Each Part of this For	rm	
ss Dart 1.	Total roal estate	line 2	·····	\$
	Total vehicles, li		\$	***************************************
		and household items, line 15	s 7, 700	
	Total financial a		\$	
		related property, line 45	¢	
			•	
		fishing-related property, line 52		
		erty not listed, line 54	7 -7.7()	. 7 700
62. Total p	ersonal property	y. Add lines 56 through 61,	\$ 7,700 Copy personal property total →	+s <u>7</u> ,700
63. <b>Total o</b>	f all property on	Schedule A/B. Add line 55 + line 62.		s_7,700

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Fill in this information to identify your case:			
Debtor 1 JERMAINE	POLK	- And Assessment Asses	
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name  United States Bankruptcy Court for the Northern Distri	Last Name		
Case number	ict of fairlois		☐ Check if this is an
(if known)			amended filing
Official Form 106C			
Schedule C: The Pro	perty You	Claim as Exempt	04/16
Be as complete and accurate as possible. If two may Using the property you listed on <i>Schedule A/B: Property</i> space is needed, fill out and attach to this page as a your name and case number (if known).	perty (Official Form 106/	A/B) as your source, list the property that	you claim as exempt. If more
For each item of property you claim as exempt, specific dollar amount as exempt. Alternatively, of any applicable statutory limit. Some exemption retirement funds—may be unlimited in dollar an limits the exemption to a particular dollar amount would be limited to the applicable statutory amounts.	you may claim the full ons—such as those for nount. However, if you nt and the value of the	fair market value of the property bein r health aids, rights to receive certain t claim an exemption of 100% of fair ma	g exempted up to the amount benefits, and tax-exempt irket value under a law that
Part 1: Identify the Property You Claim	n as Exempt		
<ol> <li>Which set of exemptions are you claiming?</li> <li>You are claiming state and federal nonban</li> <li>You are claiming federal exemptions. 11 U</li> <li>For any property you list on Schedule A/B t</li> </ol>	kruptcy exemptions. 11 J.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
•	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief	¢	<b>□</b> \$	
description:  Line from  Schedule A/B:	Ψ	100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>Q</b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption o     (Subject to adjustment on 4/01/19 and every 3)			
No  Yes. Did you acquire the property covered			
No  Yes	nà nia avambion mitiliti	The to days before you need and case?	

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Debtor 1

JERMAINE POLK

First Name Middle Name Last Name

Case number (# known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	, \$ <u></u>	<b>Q</b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>Q</b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>D</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>Q</b> s	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B: ————		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>u</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	se:			
JERMAINE	POLK			
Debtor 1 First Name Middle	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number				
(If known)			Check of amende	if this is an ed filing
				34g
Official Form 106D				
Schedule D: Creditor	rs Who Have Claims Secur	ed by Pro	perty	12/15
information. If more space is needed, co additional pages, write your name and ca 1. Do any creditors have claims secured	by your property? rm to the court with your other schedules. You have noth	and attach it to this	s form. On the top of	t any
Part 1: List All Secured Claims				
for each claim. If more than one creditor	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. shabetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Describe the property that secures the claim:	\$	s	\$
Creditor's Name				
Number Street	_			
numper Street	As of the date you file, the claim is: Check all that apply			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred	Last 4 digits of account number	_	_	_
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
	_			
Number Street				
	As of the date you file, the claim is: Check all that apply			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)	-		
Check if this claim relates to a community debt		<del></del>		
Date debt was incurred	Last 4 digits of account number  Column A on this page. Write that number here:	k	1	

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JERMAINE	POLK	maker .v.		
First Name Middle Name	Last Name Case no	imber (if known)		<del></del>
Additional Page Part 15 After listing any entries on this play 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	***		
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	}
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply			
	☐ Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
	Describe the second that are the shall a			
Creditor's Name	Describe the property that secures the claim:	\$	\$\$	i
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Unfiquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)	_		
Check if this claim relates to a community debt	/ ///////////////////////////////	-		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	in Column A on this page. Write that number here:	:		
	add the dollar value totals from all pages.	\$		

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**JERMAINE POLK** Debtor 1 Case number (if known)\_ Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? \_\_\_\_ Name Last 4 digits of account number \_\_\_\_ \_ Number ZIP Code City State On which line in Part 1 did you enter the creditor? \_\_\_\_ Last 4 digits of account number \_\_\_\_\_ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_\_ Name Last 4 digits of account number \_\_\_\_\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_\_ \_\_ \_\_ Number Street City ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_\_ Name Last 4 digits of account number \_\_\_\_ \_\_\_ Number Street City ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_\_ Name Last 4 digits of account number \_\_\_\_\_ Number Street City State

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F	ll in this in	formation to identify your case:					
D	ebtor 1	JERMAINE	POLK				
	·	First Name Middle Name	Last Name				
	ebtor 2 pouse, if filing)	First Name Middle Name	Last Name				
U	nited States I	Bankruptcy Court for the: Northern District o	of Illinois				
	ase number fknown)		hadderfload and the state of th				k if this is an nded filing
	· · · · · ·	- 400mm		•			
		Form 106E/F	fina Maria II maaan		41.44		45.45
		ule E/F: Creditors W					12/15
List A/B cre- nee any	t the other 8: Property ditors with ded, copy additiona	te and accurate as possible. Use Part party to any executory contracts or ur (Official Form 106A/B) and on Schedu partially secured claims that are liste the Part you need, fill it out, number to I pages, write your name and case number that of Your PRIORITY Unsecured.	nexpired leases that could result ule G: Executory Contracts and least d in Schedule D: Creditors Who he entries in the boxes on the least mber (if known).	t in a claim. Also lis Unexpired Leases (I Have Claims Secur	st executory co Official Form 10 ed by Property.	ntracts on Se 6G). Do not i If more spac	chedule include any ce is
W. STATE		editors have priority unsecured claims		·····			· · · · · · · · · · · · · · · · · · ·
	No. Go		agamst your				
	Yes.	your priority unsecured claims. If a cre	aditor has more than one priority u	secured claim list th	ne creditor senar	ately for each	claim For
	each claim	listed, identify what type of claim it is. If amounts. As much as possible, list the claims, fill out the Continuation Page of I	a claim has both priority and nonpr laims in alphabetical order accordi	iority amounts, list th ng to the creditor's n	at claim here and ame. If you have	show both p more than tw	riority and o priority
	(For an exp	planation of each type of claim, see the in	nstructions for this form in the instr	uction booklet.)	Tatal alaim	Dain aite	Nonnrienite
					Total claim	Priority amount	Nonpriority amount
2.1	Come		Last 4 digits of account number	OTYT	\$ 509	\$	
	Priority Cred		When was the debt incurred?	10/16			
	Number	Sueet	As of the date you file, the claim	is: Check all that apply	,		
	Dick	Son City, PH. 18519	Contingent				
	City	State ZIP Code	☐ Unliquidated				
	Wno incu	rred the debt? Check one.	☐ Disputed				
	Debtor	•	Type of PRIORITY unsecured	claim:			
	-	1 and Debtor 2 only	Domestic support obligations				
		st one of the debtors and another	Taxes and certain other debts yo	=			
		k if this claim is for a community debt	Claims for death or personal injuintoxicated	ry while you were			
	is the clai	im subject to offset?	Other. Specify				
	Yes	<b>.</b>					
2.2	Emer	-gency Medical	Last 4 digits of account number	193	<u>\$ 701</u>	\$	\$
	Priority Cred	itad Name (air St.	When was the debt incurred?	3/11	<u> </u>	~ <u></u>	4
	Number	Street	As of the date you file, the claim	is: Check all that apply	,		
	Ctro	ator. FL 61364	Contingent	20 Circuit an alar apply			
	City	State ZIP Code	Unliquidated				
	Who incu	rred the debt? Check one.	☐ Disputed				
	Debtor		Type of PRIORITY unsecured	claim:			
	Debtor	· 2 only · 1 and Debtor 2 only	Domestic support obligations				
		at one of the debtors and another	Taxes and certain other debts yo	•			
		cif this claim is for a community debt	Claims for death or personal injuintoxicated	ry while you were			
		im subject to offset?	Other. Specify				
	No No						

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Debtor 1

**JERMAINE** 

First Name Middle Name

POLK

Case number (if known)\_\_\_\_

TOUR PRIORITY Unsecured Claims — Continuation Page					
Aft	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Diversified Consultant	Last 4 digits of account number $\frac{39444}{}$	<u> </u>	\$	\$
	Number Street Street	When was the debt incurred? 10/16			
	#309	As of the date you file, the claim is: Check all that apply.			
	Jacksonville, FL. 32356 City State ZIP Code  Who incurred the debt? Check one.	Contingent Unliquidated Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations  Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	₫ No				
	Yes				
<u> </u>	EPC	9294	s 763	ø	•
	Priority Creditor's Name	Last 4 digits of account number 1 2 1 1	\$	<b>4</b>	<b>3</b>
	PO BOX 5 1541	When was the debt incurred? $\frac{1015}{15}$			
		As of the date you file, the claim is: Check all that apply.			
	Jacksonville, Fr. 32241  City State 21P Code	Contingent Unliquidated			
	lifted incommend the stable Objections	☐ Disputed			
	Who incurred the debt? Check one.	Tune of PRIORITY unpersured stains			
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated			
		Other, Specify			
	Is the claim subject to offset?				
	Yes				
	Yes	100	. 60		
Ll	Western Funding	Last 4 digits of account number 1931	511,280	\$	\$
	Priority Creditor's Name P.O. BOX 948580  Number Street	When was the debt incurred?	,		
	3344	As of the date you file, the claim is: Check all that apply.			
	1.11 NI 89167				
	City State ZIP Code	Contingent Unliquidated Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Taxes and certain other debts you owe the government			
		Claims for death or personal injury while you were intoxicated			
	Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	Yes				

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Case number (# known)\_

Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority	Nonpriority
	Phorty Creditor's Name P.O. Box 5439  Number Street  Greenville, SC 29000 City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt	Last 4 digits of account number 0.5.5.0  When was the debt incurred? 6.1.4  As of the date you file, the claim is: Check all that apply.  Contingent 1.1  Unliquidated 2.2  Disputed  Type of PRIORITY unsecured claim:  Commestic support obligations 1.2  Taxes and certain other debts you owe the government 1.2  Claims for death or personal injury while you were intoxicated 1.2  Other. Specify 1.2  United 1.2  Other. Specify 1.2  United 1	\$1,750	amount	amount \$
	Is the claim subject to offset?  No Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	. \$
	Number Street	When was the debt incurred?  As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code  Who incurred the debt? Check one.	Contingent Unliquidated Disputed			
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			
	Is the claim subject to offset?  No Yes		\$	œ	¢
	Priority Creditor's Name  Number Street	Last 4 digits of account number When was the debt incurred?	9	J	\$
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code  Who incurred the debt? Check one.	Contingent Unliquidated Disputed			
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Claims for death or personal injury white you were intoxicated  Other. Specify			
	ls the claim subject to offset? ☑ No	Citot. Opening			
	Yes				

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Debtor 1

POLK **JERMAINE** 

	35Y				
	-		:37	22	10
		-	•	ж.	- 7
400	-	• 1		657	-

#### List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you \( \subseteq No. You have nothing to report in this part. Submit this form to the \( \subseteq \text{Yes} \)		
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, liclaims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	list claims already
	<b>n</b>		Total claim
4.1		Last 4 digits of account number	e
	Nonpriority Creditor's Name	When was the debt incurred?	Φ
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	·	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	·	that you did not report as priority claims	
	Is the claim subject to offset?	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify</li> </ul>	
	Yes	Other: Specify	
<del></del>	1		_
1.2		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	☐ Yes		
.3		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
		Wildli was the destinouried i	
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Tune of NONDBIODITY understand alaims	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans  Obligations arising out of a separation agreement or divorce	
	is the claim subject to offset?	that you did not report as priority claims	
	☐ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debtor 1

**JERMAINE** 

First Name

**POLK** 

Case number (# known)\_\_\_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

fter listing any entries on this page, number them beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	<u> </u>
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code  Who incurred the debt? Check one.	Contingent Unliquidated Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
Check if this claim is for a community debt Is the claim subject to offset?  No Yes	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify</li> </ul>	
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.  Debtor 1 only	☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?  No Yes	Other. Specify	
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset? ☐ No	Other. Specify	
☐ Yes		

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Debtor 1

JERMAINE	
<u> </u>	

**POLK** 

Case number (# known)\_

Part 38

#### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of /Chaok analy [7] Bort 1: Craditors with Briggin Haganward Claims
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
				Claims
	Constitution of the Association and Association and Association of the Association of the Association and Asso			Last 4 digits of account number
City		State	ZIP Code	Edst 4 digits of account fightings
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Chaple and): D Bod 1: Conditors with Briggins Lineau and Claims
Number	Street	***************************************		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City		State	ZIP Code	Last 4 digita of decodific fundation
Name	-	**************************************	······································	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	<del></del>		Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name	~~~		<del></del>	On which entry in Part 1 or Part 2 did you list the original creditor?
7.2				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		Part 2: Creditors with Nonpriority Unsecured
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			Claims
0.74		State	ZIP Code	Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	***************************************			On which entry is rast 1 of rait 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Claims
City		State	ZIP Code	Last 4 digits of account number
				On which cuts, in Boat 4 on Boat 9 did you like the policinal and the O
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Monake	Chront			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Ciaiiiis
City		State	ZIP Code	Last 4 digits of account number

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Total claim

Debtor 1

**JERMAINE** 

First Name Middle Name **POLK** 

Case number (if known)\_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims	6a. Domestic support obligations	6a. <u>\$ 15,121</u>
from Part 1	6b. Taxes and certain other debts you owe the government	6b. \$
	6c. Claims for death or personal injury while you were intoxicated	6c. <b>\$</b>
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. + <sub>\$</sub>
	6e. <b>Total.</b> Add lines 6a through 6d.	6e. <u>\$ 15, 12 1</u>
		Total claim
Total claims	6f. Student loans	6f. \$
from Part 2	<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ol>	6g. \$
	6h. Debts to pension or profit-sharing plans, and other similar debts	
	<ol> <li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ol>	6i. + ş

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Fill in this in	Fill in this information to identify your case:					
Debtor	JERMAINE		POLK			
Debioi	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for th	e: Northern District of	Illinois			
Case number						
(if known)			an paragraphic parace.			
			<del></del>	<del></del>		

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

Person or company with whom you have the contract or lease

- W No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for
  example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and
  unexpired leases.

2.1 Name Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 24 Name Number Street City State ZIP Code 2.5 Name

State

ZIP Code

State what the contract or lease is for

Number

City

Street

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Debt	or 1	JERMAINE		POLK	Case number (if known)
		First Name Midd	le Name	Last Name	
		Additional Pag	e if You Ha	ave More Contracts or Leas	es
	Person	or company with	whom you	have the contract or lease	What the contract or lease is for
2 <u>2</u>					
	Name				
	Number	Street			
	City		State	ZIP Code	na n
•	City		State	ZIP Code	
2	Name		·	***************************************	ALL CONTRACTOR OF THE PROPERTY
	Number	Street			
		Street			
	City		State	ZIP Code	
2		***************************************			
	Name				
	Number	Street			
	City		State	ZIP Code	<del></del>
2					
	Name	***************************************			<del></del>
	Number	Street			
	City		State	ZIP Code	_
2					
	Name				
	Number	Street			***************************************
	City		State	ZiP Code	
2			*		
	Name		······································		мани
	Number	Street			
					Marine.
	City		State	ZIP Code	
2	Name	is the charity of the Color of			
					Annua.
	Number	Street			
	City		State	ZIP Code	<del></del>
2					
	Name				
	Number	Street	***************************************		and the second s
	City		State	ZIP Code	ABOUTE TO THE PARTY OF THE PART

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Fill	in this i	nformation to identi	fy your case:				
Deh	tor 1	JERMAINE		POLK			
		First Name	Middie Name	Las	( Name		
	tor 2 use, if filing	) First Name	Middle Name	Ĺas	t Nøme		
Unit	ed States	Bankruptcy Court for the	e: Northern District of	Illinois			
	e number	**************************************					_
(11 K)	rown)	- Watter				1	☐ Check if this is ar amended filing
\ \ \	المنمن	106il					arriorided lilling
	·····	Form 106H					
	~	ule H: You					12/15
are fi	ling toge lumber t	ether, both are equa	lly responsible for a xes on the left. Atta	supplying co	orrect information. I	f more space	te and accurate as possible. If two married people is needed, copy the Additional Page, fill it out, top of any Additional Pages, write your name an
	Oo you h	ave any codebtors?	' (If you are filing a jo	int case, do	not list either spouse	as a codebt	Of.)
	Yes						
		i <mark>e last 8 years, have</mark> California, Idaho, Lou	•		-	•	nity property states and territories include
	/	So to line 3.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		g.c, u.	
		Did your spouse, form	ner spouse, or legal	equivalent liv	e with you at the time	e?	
	□ N	0					
	☐ Y	es. In which commun	ity state or territory o	lid you live?		Fill in the	name and current address of that person.
	Ň	iame of your spouse, former	spouse, or legal equivalen	t	·*************************************	<del></del>	
	-			***************************************	-		
	N	lumber Street					
	õ	ity	State		ZIP Code		
9	shown ir Schedule	i line 2 again as a co	odebtor only if that 96D), Schedule E/F	person is a (Official For	guarantor or cosigr	ner. Make su	pouse is filing with you. List the person are you have listed the creditor on that is like the cite of the control of the cont
	Column	1: Your codebtor				Co	lumn 2: The creditor to whom you owe the debt
<del></del> -						Ch	eck all schedules that apply:
3.1	***************************************						Schedule D, line
	Name						Schedule E/F, line
	Number	Street		<del></del>			Schedule G, line
	City		State		ZIP Code		
3.2							
	Name		Westerstein ( Westerstein ( Mesterstein ( Me				Schedule D, line
	Number	Street					Schedule E/F, line Schedule G, line
							Scheduse G, like
3.3	City		State	)	ZIP Code	•	
J.J	Name			·	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	0	Schedule D, line
							Schedule E/F, line
	Number	Street					Schedule G, line
	City	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	State		ZIP Code		

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**JERMAINE POLK** Debtor 1 Case number (if known) Last Name **Additional Page to List More Codebtors** Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.\_ ☐ Schedule D, line \_\_\_\_ Name ☐ Schedule E/F, line ☐ Schedule G, line \_\_\_\_\_ Number Street City ZIP Code 3.\_\_ ☐ Schedule D, line \_\_\_\_\_ Name ☐ Schedule E/F, line ☐ Schedule G, line \_\_\_\_\_ Number Street City State ZIP Code ☐ Schedule D, line \_\_\_\_\_ Name ☐ Schedule E/F, line \_\_\_\_ ☐ Schedule G, line \_\_\_\_\_ Number Street City Z}P Code ☐ Schedule D, line \_\_\_\_\_ Name ☐ Schedule E/F, line \_\_\_\_\_ ☐ Schedule G, line \_\_\_\_\_ Number Street City ZIP Code ☐ Schedule D, line \_\_\_ Name ☐ Schedule E/F, line \_\_\_\_ ☐ Schedule G, line Number Street City State ZIP Code Schedule D, line \_\_\_\_\_ Name ☐ Schedule E/F, line \_\_\_\_ ☐ Schedule G, line \_\_\_\_\_ Number Street City ZiP Code Schedule D, line \_\_\_\_\_ Name ☐ Schedule E/F, line \_\_\_\_ G. Schedule G, line Number Street City State ZIP Code 3.\_\_ Schedule D, line \_\_\_\_\_ Name ☐ Schedule E/F, line \_\_\_\_ Schedule G, line \_\_\_\_\_ Number Street

ZIP Code

page \_\_\_ of \_\_\_

State

City

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Fill in this information to identify	your case:						
JERMAINE	POLK	<u> </u>					
First Name  Debtor 2	Middle Name	£ast Name					
(Spouse, if filing) First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:	vortnern district of Illinois				Check if th	i_ i	
Case number (If known)				1		is is: ended filling	
	·····				A suppl	lement showing post as of the following d	
Official Form 106I					MM / DE	D/ YYYY	
Schedule I: You	ır Income						12/15
Be as complete and accurate as posupplying correct information. If you fill you are separated and your spouseparate sheet to this form. On the	ou are married and not fill se is not filing with you, top of any additional pag	ing jointly, and yo do not include in	our sp forma	ouse is liv	ing with yo your spou	ou, include informationse. If more space is n	n about your spouse. eeded, attach a
Fill in your employment information.		Debtor 1	nova bribani abbah	JALINAN IS CONTROL VILLES AND	BOO SCIENCE WAS INVESTIGATED BY BOOK STATE OF ST	Debtor 2 or non-fi	ling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☑ Employed ☑ Not employ	ed ·			Employed Not employed	
Include part-time, seasonal, or self-employed work.	Occupation	Drive	<u> </u>				
Occupation may include student or homemaker, if it applies.	Employer's name	TPalk		Truck	1.06		
		0225				maan dan dii aan aan kaan ilaah ke kanaad ka dan dan daddan ka da daddan ka ka da da da da da da aan aan aan a	
	Employer's address	Number Street	Kir	<u>19540</u>	<u>&lt;</u>	Number Street	
		Chicago	TU	- 606	810		
	How long employed the	re? 3	Stat	te ZIP Cod	е	City	State ZIP Code
Part 2: Give Details About	Monthly Income						
Estimate monthly income as of spouse unless you are separated.		n. If you have noth	ing to	report for a	ny line, writ	ie \$0 in the space. Inclu	de your non-filing
If you or your non-filing spouse ha below. If you need more space, at			ormatio	on for all en	aployers for	r that person on the line	s
				For De	btor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly,			2.	\$ <u></u>	50	\$	
3. Estimate and list monthly over	time pay.		3.	+\$	************	+ \$	
4. Calculate gross income. Add lir	ne 2 + line 3.		4.	s <u>4,0</u>	50	\$	

Official Form 1061 Schedule I: Your Income page 1

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Debtor 1	JERMAIN First Name	NE Møde Name	POLK Last Name		Case number	(if knoven)			The second secon
		3330			For Debtor 1		For Debtor 2 or non-filing spouse		
Conv	/ line 4 here			<b>→</b> 4.	s 4,050	Consults :	\$		
	ıli payroli dedu								
			. dudustinus	5a.	<b>.</b>		¢		
		and Social Security		5b.	\$		\$ \$		
	•	ntributions for retire	•	5c.	\$ \$		\$		
	•	tributions for retiren yments of retiremen		5d.	\$		\$		
	Insurance	yments of remember	terana ioans	5e.	\$		\$		
		port obligations		5f.	\$		\$		
	•	port obnigations			\$		\$		
_	Union dues	Canally		5g. 5h.	+s		+ \$		
					* \$		, p		
6. Add	i the payroli de	ductions. Add lines	5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	. 6.	\$		\$		
7. Cale	culate total mo	nthly take-home pay	y. Subtract line 6 from line 4.	7.	<u>\$4,050</u>	<del>}</del>	\$		
8. List	all other incon	ne regularly received	1:						
	Net income fro profession, or		nd from operating a business,						
		ry and necessary bus	and business showing gross siness expenses, and the total	8a.	\$		\$		
	Interest and di			8b.	\$		\$		
			, a non-filing spouse, or a depende	ent	-		<del>* - *</del>		
	regularly recei	ve							
		r, spousal support, ch property settlement.	ild support, maintenance, divorce	8c.	\$		\$		
8d.	Unemploymen	t compensation		8d.	\$		\$		
8e.	Social Securit	y		8e.	\$		\$		
	Include cash as that you receive Nutrition Assist	sistance and the valu		nce 8f.	\$	<del></del>	\$		
		irement income		8g.	¢		\$		
Ū				-	ų		<u> </u>		
			o + 8c + 8d + 8e + 8f +8g + 8h.	8ħ. 9.	+ <u>\$</u>	_	\$	1	
10. Calc	ulate monthly i	income. Add line 7 +	line 9.		s4,050	7	*	]_	s4,050
			I Debtor 2 or non-filing spouse.	10.	L			]	
Inclu			the expenses that you list in Sche partner, members of your household,			roomr	nates, and other		
Do n	ot include any a	mounts already inclu	ded in lines 2-10 or amounts that are	not a	vailable to pay ex	pense			
Spec	cify:						_ 11.	+	\$
Write	e that amount o	n the <i>Summary of You</i>	ine 10 to the amount in line 11. The ur Assets and Liabilities and Certain S	Statist	ical Information, i				s 4,050 Combined monthly income
	you expect an No.	increase or decreas	e within the year after you file this	form?	) 		( <u> </u>		
	Yes. Explain:								
						***************************************			<del></del>

Official Form 1061 Schedule 1: Your Income page 2

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Fill in this information to identi	ify your case:			
Debtor 1 JERMAINE	POLK		· . · .	
Debtor 2	Middle Name Last Name	Check if th		
(Spouse, if filing) First Name	Middle Name Last Name	An ame	-	stpetition chapter 13
United States Bankruptcy Court for the	e: Northern District of Illinois		es as of the following	
Case number (if known)		MM / DE	O/ YYYY	
Official Form 106J				
Schedule J: Yo	- our Expenses			12/15
Be as complete and accurate as	possible. If two married people are fill eded, attach another sheet to this form on.			
Is this a joint case?			· · · · · · · · · · · · · · · · · · ·	
No. Go to line 2.  Yes, Does Debtor 2 live in a	a consents haveahald?			
No	a separate nousenoid?			
<del></del>	file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No	Chamanatanasa malaasanatah sa	PadN	Para dana dana Usa
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.				☐ No ☐ Yes
			***************************************	☐ No ☐ Yes
				□ No □ Yes
		WITH A WHAT HE HAVE A CONTROL OF THE STATE O		☐ No ☐ Yes
			ar Nave Agenture Agenture accompany	□ No □ Yes
Do your expenses include expenses of people other than yourself and your dependents.				
Parte24 Estimate Your Ong	oing Monthly Expenses			
·	ur bankruptcy filing date unless you a ankruptcy is filed. If this is a suppleme	- ,,	•	•
•	on-cash government assistance if you		Vour eve	nece
4. The rental or home ownership	ed it on Schedule I: Your Income (Office expenses for your residence. Include	·	Your expenses of the second se	is produced that should be not distributed to a being the delication of the section.
any rent for the ground or lot.  If not included in line 4:			4.	
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or	renter's insurance			
4c. Home maintenance, repair				
4d. Homeowner's association	or condominium dues		4d. \$	

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Debtor 1	JERMAINE	POLK	Coco number (4)
Deproi :	First Name 14m	fdle Name Last Name	Case number (# known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	S
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	s <b>3</b> 140
	6b. Water, sewer, garbage collection	6b.	s 50
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	s <u><b>3</b>00</u>
	6d. Other. Specify:	6d.	\$
7.		7.	s 325
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	s_180
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	s 200
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
.O.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Debtor 1			POLK	Case nu	mber (if known)	
21. <b>Oti</b>	First Name Middle  ner. Specify:	e Name Last Name		terfester.	21.	+\$
22. Cal	culate your monthly ex	rpenses.				
22a	. Add lines 4 through 21				22a.	\$ 1,995
22t	. Copy line 22 (monthly	expenses for Debtor 2),	if any, from Official For	m 106J-2	22b.	s # J.P.
220	. Add line 22a and 22b.	The result is your month	nly expenses.		22c.	s 1,995
23. <b>Calc</b>	ulate your monthly net	income.				4050
23a.	Copy line 12 (your con	nbined monthly income)	from Schedule I.		23a.	\$ 7,000
23b.	Copy your monthly exp	penses from line 22c ab	ove.		23b.	-\$ 1,995
23c.	Subtract your monthly	expenses from your mo	onthly income.			. 2 055
	The result is your mon	thly net income.			23c.	3-41

#### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes. Explain here:

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Fill in this information to identify	fy your case:			
Debtor 1 JERMAINE	POLK	Observation of the control of the co		
First Name  Debtor 2	Middle Name Lest Name	Check if this i		
(Spouse, if filing) First Name	Middle Name Last Name	A supplem	₹	petition chapter 13
United States Bankruptcy Court for the	e: Northern District of Illinois		as of the following	
Case number (if known)		MM / DD /	YYYY	
Official Form 106J-2				
Schedule J-2:	Expenses for Sepa	rate Household o	f Debtor	2 12/15
Debtor 2 have one or more deper only with respect to expenses for	rate household expenses ONLY IF De indents in common, list the dependent or Debtor 2 that are not reported on Sci this form. On the top of any additional	s on both Schedule J and this for hedule J. Be as complete and acc	m. Answer the que curate as possible.	estions on this form If more space is
Part 1. Describe Your Ho	ousehold	** ** , '		
1. Do you and Debtor 1 maintain	separate households?			
No. Do not complete this to Yes	form.			
Do you have dependents?  Do not list Debtor 1 but list all	□ No	Dependent's relationship to Debtor 2:	Dependent's	Does dependent live
other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on	☑ Yes. Fill out this information for each dependent		<b></b>	with you?
Schedule J.  Do not state the dependents'				☐ No
names.				Yes
		755777774 TUTO TO THE TOTAL TOT		☐ No ☐ Yes
				☐ No
				☐ Yes
				☐ No ☐ Yes
<ol> <li>Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?</li> </ol>	☐ No ☐ Yes			
Pari 2: Estimate Your Ongo	oing Monthly Expenses			
Estimate your expenses as of you expenses as of a date after the ba	ur bankruptcy filing date unless you a	re using this form as a supplemer	nt in a Chapter 13 c	ase to report
	, ,	for any sing various of		
	on-cash government assistance if you ed it on S <i>chedule I:</i> Yo <i>ur Income</i> (Offic		Your expe	
4. The rental or home ownership any rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and	4. \$	
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or	renter's insurance		4b. \$	,
4c. Home maintenance, repair	, and upkeep expenses		4c. \$	
4d. Homeowner's association of	or condominium dues		4d. \$	

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Debtor 1	JERMAINE	<u>-</u>		LK	Case number (if known)	
	First Name	Middle Name	Last Name		·-	

			Your expenses
r	Additional mediana payments for your residence, such as home souit Joses		Security to the Beautiful Control of Security Se
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:	10.	
11.	17a. Car payments for Vehicle 1	17a.	\$
	, ,		
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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De	ebtor 1	JERMAIN		POLK	Case number (if knows	7)	 
21.	Other. S	First Name  Specify:	Middle Name	Lasi Name		21.	
22.	The resu	ılt is the mont	ses. Add lines 5 hly expenses of l btor 1 and Debtor	Debtor 2. Copy the result	to line 22b of Schedule J to calculate the	22.	\$
23.	Line not u	used on this fo	orm.				
24.	Do you e	xpect an inc	rease or decrea:	se in your expenses wit	hin the year after you file this form?		
		-	-		in the year or do you expect your ation to the terms of your mortgage?		
	No. Yes.	Explain he	re:				

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			POLK		
otor 2	Fixst Name	Middle Name	Last Name	- Andrews	
	First Name	Middle Name	Les! Name		
ed States	Bankruptcy Court for the	: Northern District	of Illinois		
number nown)	49.49(a)7-49.a(c)				
					Check if this is amended filing
ecl	aration /	Land on			
		rbont ar	i individual i	Debtor's Schedules	12/15
wo mari u must i taining i	ied people are filing	together, both a ver you file bankr y fraud in connec	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case	Debtor's Schedules applying correct information. d schedules. Making a false statement, concert can result in fines up to \$250,000, or impris	cealing property, or
two mari ou must i	ried people are filing file this form whene money or property b	together, both a ver you file bankr y fraud in connec	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case	applying correct information. d schedules. Making a false statement, conc	cealing property, or
two mari	ried people are filing file this form whenever the money or property both. 18 U.S.C. §§ 15.	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case i 3571.	applying correct information. d schedules. Making a false statement, conc	
bu must staining ars, or b	ried people are filing file this form whenever the money or property both. 18 U.S.C. §§ 15.	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case i 3571.	applying correct information. d schedules. Making a false statement, conc can result in fines up to \$250,000, or impris	cealing property, or conment for up to 20
bu must staining ars, or b	ried people are filing file this form whenever money or property both. 18 U.S.C. §§ 15.  Sign Below  I pay or agree to pay	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case i 3571.	upplying correct information.  d schedules. Making a false statement, concerning the content of	cealing property, or conment for up to 20
bu must staining ars, or b	ried people are filing file this form whenever money or property both. 18 U.S.C. §§ 15.  Sign Below  I pay or agree to pay	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case i 3571.	u fill out bankruptcy Petition Preparer's Notice, Deci	cealing property, or conment for up to 20
bu must staining ars, or b	ried people are filing file this form whenever money or property both. 18 U.S.C. §§ 15.  Sign Below  I pay or agree to pay	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case i 3571.	u fill out bankruptcy Petition Preparer's Notice, Deci	cealing property, or conment for up to 20
Did you	ried people are filing file this form whenever money or property both. 18 U.S.C. §§ 15:  Sign Below  I pay or agree to pay  . Name of person	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case (3571.	u fill out bankruptcy Petition Preparer's Notice, Deci	cealing property, or conment for up to 20
two mari	ried people are filing file this form whenever money or property both. 18 U.S.C. §§ 15.  Sign Below  I pay or agree to pay	together, both a ver you file bankr y fraud in connec 2, 1341, 1519, and	re equally responsible for su uptcy schedules or amende ction with a bankruptcy case i 3571.	u fill out bankruptcy Petition Preparer's Notice, Deci	onment for up

Date MM / DD / YYYY

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Debtor 1  Debtor 2 (Spouse, if filing) First No  United States Bankru  Case number (if known)  Official Forr  Statement e as complete and formation. If morumber (if known).  Part 11: Give I  1. What is your complete in the state of the sta	ruptcy Court for the: Nort  "m 107  It of Financi nd accurate as possib	ial Affai ble. If two mar attach a separ tion. ar Marital Sta	rs for Individed people are filinate sheet to this for	riduals Filing to g together, both are equarm. On the top of any additional control of the top of	liy responsible for supp	lying correct
(Spouse, if filing) First Number  (Spouse, if filing) First Number  (If known)  Official Forr  Statement  e as complete and formation. If morumber (if known).  Part It Give It  No What is your complete and No Yes. List all  Debtor 1:	m 107  t of Financi nd accurate as possit ore space is needed, a). Answer every ques	ial Affai ble. If two mar attach a separ tion.	rs for Indiv	g together, both are equa rm. On the top of any addi	liy responsible for supp	amended filing  y 04/- lying correct
if known)  Official Forr  tatement  as complete and ormation. If more more (if known).  Ont 1: Give I.  What is your complete last  No During the last  No Yes. List all  Debtor 1:  Number	m 107  It of Financi  Ind accurate as possible or space is needed, and accurate as possible or space is needed,	ial Affai ble. If two mar attach a separ tion. ar Marital Sta	rs for Individed people are filinate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	amended filing  y 04/- lying correct
fficial Forr tatement as complete and ormation. If more and ormation. If more and ormation. If more and ormation. If we complete and ormation. If more and ormation. If more and ormation are and ormation. If more and ormation are and ormation. If we complete and ormation. If	nt of Financi and accurate as possit ore space is needed, a ). Answer every quest Details About You	ble. If two mar attach a separ tion. ar Marital Sta	ried people are filin ate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	amended filing  y 04/
fficial Forr tatement as complete and ormation. If more more (if known).  The Give I  What is your of Not married During the last No Yes. List all Debtor 1:  Number	nt of Financi and accurate as possit ore space is needed, a ). Answer every quest Details About You	ble. If two mar attach a separ tion. ar Marital Sta	ried people are filin ate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	amended filing  y 04/
as complete and ormation. If mormation. If mormation if known).  and 1: Give I  What is your complete and ormation if known is your complete and or it is not married.  During the last is not in the last is not married.  During the last is not in the last is not married.  During the last is not in the last is not married.  During the last is not in the last is not married.  No Debtor 1:	nt of Financi and accurate as possit ore space is needed, a ). Answer every quest Details About You	ble. If two mar attach a separ tion. ar Marital Sta	ried people are filin ate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	lying correct
as complete and ormation. If mormation. If mormation. If mormation. If known).  and 19 Give I  What is your complete and Married  Not married  During the last  No Yes. List all  Debtor 1:	nt of Financi and accurate as possit ore space is needed, a ). Answer every quest Details About You	ble. If two mar attach a separ tion.	ried people are filin ate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	lying correct
as complete and formation. If more imber (if known).  And Give I  What is your complete and Married  Not married  Puring the last  No Yes. List all  Debtor 1:	nt of Financi and accurate as possit ore space is needed, a ). Answer every quest Details About You	ble. If two mar attach a separ tion.	ried people are filin ate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	lying correct
was complete and formation. If more imber (if known).  Part 1: Give I  What is your or Married  No Married  During the last  No Pes. List all  Debtor 1:  Number	nd accurate as possit ore space is needed, a ). Answer every ques Details About You	ble. If two mar attach a separ tion.	ried people are filin ate sheet to this for	g together, both are equa rm. On the top of any addi	liy responsible for supp	lying correct
ormation. If more mber (if known).  Part 1: Give I  What is your companied to Married  During the last  No Yes. List all  Debtor 1:	ore space is needed, a ). Answer every ques  Details About You	attach a separ tion. ar Marital Sta	rate sheet to this for	rm. On the top of any add		
Married  Married  Not married  No  Pebtor 1:  Number	). Answer every ques	tion. er Marital Sta		, .	monar pages, write your	Processing Case
Mhat is your companied  Married  Not married  No  Ves. List all  Debtor 1:  Number			atus and Where Y	ou Lived Before		
Married  Married  Not married  No  During the last  No  Yes. List all  Debtor 1:			atus and Where Y	ou Lived Before		
Married Not married During the last No Yes. List all Debtor 1:  Number  City	current marital status	<b>;</b> ?				
Married Not married During the last No Yes. List all Debtor 1:  Number  City						
Not married  During the last  No  Yes. List all  Debtor 1:  Number  City						
During the last No Yes. List all Debtor 1:  Number  City	ad					
No Pebtor 1:  Number  City	, ч					
Debtor 1:  Number  City	st 3 years, have you li	ived anywhere	other than where y	ou live now?		
Number City						
Number	all of the places you live	ed in the last 3	years. Do not include	e where you live now.		
City	1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
City				Same as Debtor 1		☐ Same as Debtor
City				Carro as Donor		war dame as Debior
	Street	No	From	Number Street		_ From
			To			To
		***************************************	ne n	All and the first of the should be all the artificial than the should be a find that the should be a s	tan ta a mana a matantan tan mana mana m	
Number	Stat	le ZIP Code		City	State ZIP Code	-
Number				Same as Debtor 1		Same as Debtor
Number				Gaine as Debior 1		Game as Debior
		/	From	Number Street		_ From
	Street		То			То
	Street					-
City	Street			City	State ZIP Code	-
-		e ZIP Code		•		
		e ZIP Code				
No No	State	er live with a s		ivalent in a community pro da, New Mexico. Puerto Rio		
Yes. Make s	State	er live with a s		ivalent in a community proda, New Mexico, Puerto Rid		,

Part 28 Explain the Sources of Your Income

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Debtor 1		POLK	Case ne	Imber (if known)	
	TUSE MAGNE MAKINE LASS	Name			
Fil If y	d you have any income from employment in the total amount of income you receive you are filing a joint case and you have income You. Fill in the details.	d from all jobs and all bus	inesses, including part-ti	me activities.	endar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
		Operating a business		Operating a business	
	For last calendar year:	Wages, commissions, bonuses, tips	¢	Wages, commissions, bonuses, tips	r.
	(January 1 to December 31, YYYY	Operating a business	Þ	Operating a business	\$
	For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
	(January 1 to December 31,	Operating a business	\$	Operating a business	\$
List	nbling and lottery winnings. If you are filing t each source and the gross income from e No Yes. Fill in the details.				s dilder Deblor 1.
<del></del>	res. Fill til tile detalls.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until				
	the date you filed for bankruptcy:				
			\$		\$
	For last calendar year:	W-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-1994-1-199	\$		\$
	(January 1 to December 31,)		\$		\$
	1111		\$		\$
	For the calendar year before that:		\$		\$
	(January 1 to December 31,)				
	1111	!	\$		\$

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Debtor 1	JERMAINE	POL	.K	Case	number (if known)	
	First Name Middle Name	Lást Name		•	* Assisting this program of the desired from the Assistance Assistance and the contract Assistance and the contrac	
	<b>.</b>					
Part 3:	List Certain Payments Y	ou Made Befo	re You Filed	for Bankruptcy		
6. Are ei	ther Debtor 1's or Debtor 2's o	lebts primarily c	onsumer deb	ts?		
□ No	<ul> <li>Neither Debtor 1 nor Debto "incurred by an individual printing."</li> </ul>	r 2 has primarily marily for a persor	consumer denal, family, or h	ebts. Consumer debts a nousehold purpose."	re defined in 11 U.S.C. § 10	1(8) as
	During the 90 days before yo	u filed for bankru	ptcy, did you p	ay any creditor a total o	f \$6,425* or more?	
	No. Go to line 7.					
		id that creditor. Do	o not include p	\$6,425* or more in one ayments for domestic s nents to an attorney for	upport obligations, such as	
	* Subject to adjustment on 4/	-		•	· •	
B ve	es. Debtor 1 or Debtor 2 or bot				·	
	During the 90 days before yo				\$600 or more?	
	No. Go to line 7.	,	, ,			
		***				
	Yes. List below each cred creditor. Do not inclu alimony. Also, do no	de payments for	domestic supp	\$600 or more and the to ort obligations, such as by for this bankruptcy ca	child support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
			1	\$	\$	☐ Mortgage
	Creditor's Name					Car
	Number Street		· <del></del>			Credit card
						Loan repayment
	and the second s					☐ Suppliers or vendors
	City State	ZIP Code				Other
				\$	\$	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
	Namber Street					Loan repayment
	V-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					Suppliers or vendors
	City State	ZIP Code				Other
	Oily State	ZIF Gode				
	Creditor's Name			\$	\$	☐ Mortgage
						☐ Car
	Number Street	·····				Credit card
						Loan repayment
		**************************************				Suppliers or vendors
	City State	ZIP Code				Other

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ebtor 1	JERMAINE	POL	_K		Case number (if known)	
	First Name Middle Na	ime Last Name		-	Cuse Humber (in Nicolan)	
corp age such	porations of which you are ent, including one for a bus h as child support and ali No	s; any general partners; re a an officer, director, perso siness you operate as a s mony.	elatives of any on in control, o	general partners; r owner of 20% or	partnerships of whic more of their voting	who was an insider? th you are a general partner; securities; and any managing r domestic support obligations,
	Yes. List all payments to	an ínsider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name		**************************************	\$	\$	
	Number Street		Problembe have decommended as a second			
	City	State ZIP Code		\$	\$	
	Insider's Name			*		
	Number Street		***************************************			
	City	State ZIP Code				
an i	nin 1 year before you file nsider? ude payments on debts gu			ayments or trans	fer any property o	n account of a debt that benefite
<u> </u>		15				
· ·	Yes. List all payments tha	t benented an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name	**************************************	***************************************	\$	<b>.</b> \$	
	Number Street					
	City	State ZIP Code	And Andrew Hill Andrew Providence of the Andrew Street, and the Andr			
	Insider's Name			\$	<b>\$</b> \$	
	Number Street					
		AMERICAN PROPERTY OF A PARTY OF A				
	City	State ZIP Code				

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	POLK	Case number (if known)		
First Name Middle Name	Lasi Name			
Identify Legal Actions, Re	possessions, and Foreclo	sures		
		ny lawsuit, court action, or adminis		
all such matters, including personal contract disputes.	injury cases, small claims actio	ns, divorces, collection suits, paternit	y actions, sur	oport or custody modifica
No No				
Yes. Fill in the details.				
	Nature of the case	Court or agency		Status of the case
Case title		Court Name		Pending
-				On appeal
	and American purposes and an analysis of the American purposes and an analysis	Number Street		Concluded
Case number		City State	ZIP Code	
Case title		Court Name		Pending
				On appeal
		Number Street		Concluded
Case number		City State	ZIP Code	TANYARIAA AARA
es. Fill in the information below.				
	Describe the p	operty	Date	Value of the property
	Describe the p	operty	Date	Value of the property
Creditor's Name	Describe the p	operty	Date	Value of the property
	Describe the p	operty	Date	
	Explain what h	appened	Date	
Creditor's Name	Explain what h	appened was repossessed.	Date	
Creditor's Name	Explain what he Property to Property to	appened	Date	
Creditor's Name  Number Street	Explain what he Property to Pr	appened was repossessed. was foreclosed.	Date	
Creditor's Name  Number Street	Explain what he Property to Pr	appened was repossessed. was foreclosed. was garnished. was attached, seized, or levied.	Date	
Creditor's Name  Number Street  City State	Explain what he Property to Property to Property to Property to	appened was repossessed. was foreclosed. was garnished. was attached, seized, or levied.		<u> </u>
Creditor's Name  Number Street	Explain what he Property to Property to Property to Property to	appened was repossessed. was foreclosed. was garnished. was attached, seized, or levied.		\$Value of the proper
Creditor's Name  Number Street  City State	Explain what he Property to Property to Property to Property to	appened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or levied. operty		\$Value of the proper
Creditor's Name  Number Street  City State  Creditor's Name	Explain what he Property Property Property Property Property Describe the pr	appened vas repossessed. vas foreclosed. vas garnished. vas attached, seized, or levied. operty		\$Value of the proper
Creditor's Name  Number Street  City State  Creditor's Name	Explain what he Property to Property to Property to Property to Property to Explain what he Property to Property to Property to Property to	appened was repossessed. was foreclosed. was garnished. was attached, seized, or levied. operty		\$Value of the proper

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t	JERMAINE	POLK	Case number (if know	m)	
	First Name Middle Name Last	Name	Cucc Harrior (if the	94	
ithir	n 90 days before you filed for bankru	ptcy, did any creditor, includio	ng a bank or financial instit	tution. set off anv a	mounts from vol
	ints or refuse to make a payment bed			,,	
N	0				
Υe	es. Fill in the details.				
		Describe the action the creditor	ar tank	Date action	Amount
		pescribe me action me crediti	) took	was taken	Amount
Cre	editor's Name	<del>ya</del>			
					\$
Nu	mber Street	-			Ψ
City	y State ZIP Code	Last 4 digits of account numb	ner XXXX		
		and the second second second			
ithir	1 1 year before you filed for bankrupt	ov was any of your property i	n the necessarian of an are	ianno for the hone	iit of
edit	ors, a court-appointed receiver, a cus	cy, was any or your property : stodian, or another official?	n the possession of an ass	agaee for the bene	IIE OF
No					
Ye					
	-				
53	List Certain Gifts and Contribu	tions			
<b></b>					
No		tcy, did you give any gifts with	n a total value of more than	\$600 per person?	
√No Ye G	s. Fill in the details for each gift.	tcy, did you give any gifts with  Describe the gifts	n a total value of more than	Dates you gave	Value
√No Ye G	s. Fill in the details for each gift.		n a total value of more than		Value
Ye G p	s. Fill in the details for each gift. ifts with a total value of more than \$600 er person		n a total value of more than	Dates you gave	Value \$
Ye G p	s. Fill in the details for each gift.		n a total value of more than	Dates you gave	Value
Ye G p	s. Fill in the details for each gift. ifts with a total value of more than \$600 er person		n a total value of more than	Dates you gave	\$
Ye G p	s. Fill in the details for each gift. ifts with a total value of more than \$600 er person		n a total value of more than	Dates you gave	\$
No Ye G per	s. Fill in the details for each gift. ifts with a total value of more than \$600 er person		n a total value of more than	Dates you gave	\$
No Ye G per	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift		n a total value of more than	Dates you gave	\$
No Ye G per	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift		n a total value of more than	Dates you gave	Value \$ \$
No Ye G pr	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  nber Street		n a total value of more than	Dates you gave	\$
No Ye G pr	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift		n a total value of more than	Dates you gave	\$
No Ye G pro Pers	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  ber Street  State ZIP Code	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$\$
No Ye Gp Pers	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  nber Street		n a total value of more than	Dates you gave	\$
No Ye Gp Pers	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  ber Street  State ZIP Code  son's relationship to you  ss with a total value of more than \$600	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$\$
No Ye G pro Num City Pen	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  state ZIP Code  son's relationship to you  ts with a total value of more than \$600 person	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$ \$ Value
No Ye G pro Num City Pen	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  ber Street  State ZIP Code  son's relationship to you  ss with a total value of more than \$600	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$ \$ Value
No Ye G pro	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  state ZIP Code  son's relationship to you  ts with a total value of more than \$600 person	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$ \$ Value
No Ye G pro	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  state ZIP Code  son's relationship to you  ts with a total value of more than \$600 person	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$\$
Num Pers  Gifty Pers	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  State ZIP Code  son's relationship to you  ts with a total value of more than \$600 person  son to Whom You Gave the Gift	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$ \$ Value
No Ye G po Pers	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  state ZIP Code  son's relationship to you  ts with a total value of more than \$600 person	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$ \$ Value
Num City Pers	s. Fill in the details for each gift.  ifts with a total value of more than \$600 er person  son to Whom You Gave the Gift  State ZIP Code  son's relationship to you  ts with a total value of more than \$600 person  son to Whom You Gave the Gift	Describe the gifts	n a total value of more than	Dates you gave the gifts	\$ \$ Value

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btor 1	JERMAINE	POLK	ase number (if known)	
	First Name Middle Name	Last Name	* Comment and a design of the property of the contract of the	
		rruptcy, did you give any gifts or contribution	s with a total value of more than \$	6600 to any charity?
<b>1</b>	No Yes. Fill in the details for each gift or o	nantrik, dian		
	res. Fill in the details for each gift of t	CONTIDUROR		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
ī	Charity's Name			\$
-			***************************************	\$
Ĭ	Number Street			
ō	City State ZIP Code			
rt G:	List Certain Losses			
				<del></del>
With	nin 1 year before you filed for bankr	uptcy or since you filed for bankruptcy, did yo	ou lose anything because of theft,	, fire, other
1	ster, or gambling?			
9				
<b>山</b> Y	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List claims on line 33 of Schedule A/B: Property.	loce	Value of property lost
			Manager Wilson Andrews Commen	\$
1 7:	List Certain Payments or Tra	ansfers		
you (	consulted about seeking bankrupto	uptcy, did you or anyone else acting on your b by or preparing a bankruptcy petition?		y to anyone
	•	preparers, or credit counseling agencies for serv	ices required in your bankruptcy.	
QY N □ Y	lo 'es. Fill in the details.			
		Description and value of any property transfer	rred Date payment or transfer was	Amount of paymer
	Person Who Was Paid	_	made	
	Number Street		N/10-7-10-10-10-10-10-10-10-10-10-10-10-10-10-	\$
•		••		\$
;	City State ZIP Code	-		
Ī	Email or website address			
;	Person Who Made the Coursest if Not Year	<del></del>		

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	JERMAINE	POLK	Case number (if known)		
	First Name Middle Name Lad	st Name			
		Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid	•		nanata waa mada	paymont
	***************************************	~			\$
	Number Street				\$
		-			
	City State ZIP Code	-			
	Email or website address	_			
	Person Who Made the Payment, if Not You				
<b>1</b> 2	not include any payment or transfer that y No Yes. Fill in the details.	you listed on line 16.			
		Description and value of any propert	y transferred	Date payment or transfer was	Amount of paymen
	Person Who Was Paid	•		made	
	Number Street			****	\$
	***************************************				\$
	City State ZiP Code				\$
Included Inc	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting			
Included Inc	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you have	business or financial affairs? made as security (such as the granting		ortgage on your properties of yo	
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you have	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your properties of yo	perfy). Date transfer
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers that you have the course of the co	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your properties of yo	perfy). Date transfer
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers root ficude gifts and transfers that you have yes. Fill in the details.  Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your properties of yo	perfy). Date transfer
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers root ficude gifts and transfers that you have yes. Fill in the details.  Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your property or property of the pr	perfy). Date transfer
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers root include gifts and transfers that you have yes. Fill in the details.  Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your property or property of the pr	perfy). Date transfer
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers root include gifts and transfers that you have to see that you have the course of the course of the course of the course of transfer of the course	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your property or property of the pr	perfy). Date transfer
Include Do n	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers root include gifts and transfers that you have no yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your property or property of the pr	perfy). Date transfer
Included Inc	nin 2 years before you filed for bankrup sferred in the ordinary course of your ude both outright transfers and transfers r pot include gifts and transfers that you hav No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement.  Description and value of property	of a security interest or mo	ortgage on your property or property of the pr	perfy). Date transfer

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Within 1	First Name Middle Name (	POLK	Case number iit k	(mert)	
Within 1	t a 21 i deutse - wildzie selebbe - f	last Name			***************************************
Within are a be					
	10 years before you filed for bank eneficiary? (These are often called	cruptcy, did you transfer any prope asset-protection devices.)	erty to a self-settled tru	st or similar device of	which you
No No	• .	,			
	. Fill in the details.				
		Deposite tiere and control of the			
		Description and value of the prop	erry transferred		Date transfe was made
Nam	ne of trust	Wellinster			
		_			
ner L	list Certain Financial Accour	nts, Instruments, Safe Deposit	Boxes, and Storag	je Units	
closed, include brokera	sold, moved, or transferred? checking, savings, money market	ptcy, were any financial accounts of et, or other financial accounts; cert eratives, associations, and other fir	ificates of deposit; sha		
No					
Yes.	Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance be closing or trans
Nam	ne of Financial Institution		<b>D</b>		
		XXXX	Checking		\$
Num	nber Street	_	Savings  Money market		
******			Brokerage		
City	State ZIP Code	_	Other		
			<b></b> 0444		
		_ XXXX	☐ Checking		\$
Name	e of Financial Institution		☐ Savings		·
Name					
<b></b>	ber Street	••	☐ Money market		
<b></b>	ber Street	-			
	ber Street State ZIP Code	- -	☐ Money market		

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lor 1 JERM		POLK	Case number (if known)	
First Nam	e Middle Name	Last Name	Campage application of the comment o	
<b>≌</b> No		unit or place other than your home wi	thin 1 year before you filed for bankrupto	cy?
🗖 Yes. Fill in t	the details.	Who else has or had access to it?	Describe the contents	Do you s have it?
		_		□No
Name of Stor	rage Facility	Name		☐ Yes
Number St	reet	Number Street		
	740-64	City State ZIP Code	***************************************	
City	State ZIP Cod	e		
t9; Iden	ntify Property You Ho	old or Control for Someone Else		
o you hold or or hold in trust No	control any property the for someone.	at someone else owns? Include any p	property you borrowed from, are storing	for,
Yes. Fill in t	the details.			
		Where is the property?	Describe the property	Value
		NAME OF THE PROPERTY OF THE PR		•
Owner's Nam	ie			Ψ
	reet	Number Street		Ψ
		Number Street		* <u></u>
		City State 7/5	<sup>2</sup> Code	<b>*</b>
Number Str	eet State ZIP Code	City State 7/5	<sup>o</sup> Code	<b>*</b>
Number Str	eet State ZIP Code	City State ZIF	° Code	<b>*</b>
City  City  Give  the purpose of invironmental azardous or to	State ZIP Code  Details About Environ  F Part 10, the following of law means any federal, oxic substances, wastes	city State ZiF  conmental information  definitions apply: state, or local statute or regulation cos, or material into the air, land, soil, su	oncerning pollution, contamination, relea	ses of um,
City  1410: Give the purpose of invironmental azardous or to including statutite means any	State ZIP Code  Details About Environ  F Part 10, the following of law means any federal, oxic substances, wastes tes or regulations control tocation, facility, or pro	city State ZIF commental information definitions apply: state, or local statute or regulation cos, or material into the air, land, soil, su olling the cleanup of these substance	oncerning pollution, contamination, relea	um,
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City  City  Give the purpose of exironmental exardous or to coluding statutifite means any tilize it or used azardous materials.	State ZIP Code  Details About Environ  f Part 10, the following of  law means any federal,  oxic substances, wastes  tes or regulations control  clocation, facility, or pro- ditto own, operate, or util  erial means anything an ardous material, polluta	city State ZIF commental information definitions apply: state, or local statute or regulation cos, or material into the air, land, soil, su olling the cleanup of these substance sperty as defined under any environmentalize it, including disposal sites. I environmental law defines as a hazal nt, contaminant, or similar term.	oncerning pollution, contamination, relea urface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxic	um, e, or
City  10: Give the purpose of experimental azardous or to excluding status if the means any tillize it or used azardous materials and experimental azardous materials and extension and experimental exp	State ZIP Code  Details About Environ  Part 10, the following of  law means any federal,  oxic substances, wastes tes or regulations control  location, facility, or pro- d to own, operate, or util  erial means anything an ardous material, polluta  releases, and proceedin	city State ZIF commental information definitions apply: state, or local statute or regulation cos, or material into the air, land, soil, succepting the cleanup of these substance operty as defined under any environmedize it, including disposal sites. It environmental law defines as a hazal nt, contaminant, or similar term. Ings that you know about, regardless of	oncerning pollution, contamination, relea irface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxic of when they occurred.	um, e, or
City  City  City  City  Give  the purpose of invironmental azardous or to acluding status ite means any tilize it or used azardous mate abstance, hazardous art all notices, as any governing a control of the control o	State ZIP Code  Details About Environ  Part 10, the following of  law means any federal,  oxic substances, wastes tes or regulations control  location, facility, or pro- d to own, operate, or util  erial means anything an ardous material, polluta  releases, and proceedin	city State ZIF commental information definitions apply: state, or local statute or regulation cos, or material into the air, land, soil, succepting the cleanup of these substance operty as defined under any environmedize it, including disposal sites. It environmental law defines as a hazal nt, contaminant, or similar term. Ings that you know about, regardless of	oncerning pollution, contamination, relea urface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxic	um, e, or
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City  City  1103 Give the purpose of invironmental azardous or to acluding status ite means any tilize it or used azardous mate abstance, hazardous mate abstance, hazardous mate all notices, as any governmental No No Yes. Fill in the	State ZIP Code  Details About Environ  Part 10, the following of law means any federal, exic substances, wastes tes or regulations control location, facility, or produced to own, operate, or util  erial means anything an ardous material, polluta releases, and proceedir mental unit notified you  the details.	city State ZIF commental information definitions apply: state, or local statute or regulation cos, or material into the air, land, soil, succession of these substance operty as defined under any environmedize it, including disposal sites. Henvironmental law defines as a hazal nt, contaminant, or similar term. Higs that you know about, regardless of that you may be liable or potentially leading to the commental unit	oncerning pollution, contamination, relea inface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxic of when they occurred. liable under or in violation of an environn	um, e, or c nentai law?
Number Str.  City  110: Give  the purpose of Environmental nazardous or to ncluding statut Site means any utilize it or used dazardous mate substance, haza ort all notices, das any governa No Yes. Fill in th	State ZIP Code  Details About Environ  Part 10, the following of law means any federal, exic substances, wastes tes or regulations control location, facility, or produced to own, operate, or util  erial means anything an ardous material, polluta releases, and proceedir mental unit notified you  the details.	city State ZIF commental information definitions apply: state, or local statute or regulation cost, or material into the air, land, soil, successing the cleanup of these substance operty as defined under any environmentalize it, including disposal sites. I environmental law defines as a hazant, contaminant, or similar term. Ings that you know about, regardless of that you may be liable or potentially I governmental unit	oncerning pollution, contamination, relea inface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxic of when they occurred. liable under or in violation of an environn	um, e, or c nental law?

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Debtor 1	JERMAINE First Name Middle Name	POLK Last Name	Case number (#known)	M-Winds W. A.
		unit of any release of hazardous mater	ial?	
	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site	Governmental unit	-	<del>*************************************</del>
	Number Street	Number Street	-	
		City State ZIP Code	_	
	City State ZiP Co	nde		
	The state of the s			
26. Hav	e you been a party in any judicial	or administrative proceeding under an	y environmental law? Include settlement	s and orders.
O.	Yes. Fill in the details.			
		Court or agency	Nature of the case	Status of the case
1	Case title			
		Court Name	<del></del>	Pendin
		- Control of the Cont		On app
		Number Street		Conclu
ī	Case number		<del></del>	
		City State ZIP Co	de	
Part 1	Give Details About You	r Business or Connections to Any	Business	
			ave any of the following connections to a	iny histore?
1	A sole proprietor or self-emplo	oyed in a trade, profession, or other ac	tivity, either full-time or part-time	my buomess:
(	A member of a limited liability	company (LLC) or limited liability part	nership (LLP)	
	A partner in a partnership			
	An officer, director, or managi			
į.	An owner of at least 5% of the	voting or equity securities of a corpor	ation	
	No. None of the above applies. Go			
	res. Check all that apply above an	nd fill in the details below for each bus		
۴-	JPOIK Truckin	Describe the nature of the busines		
	Business Name	J Driver	Do not include Social Se	curity number or ITIN
	8338 S. King St	00	EIN: 47-10	15822
	Number Street	Name of accountant or bookkeepe	r Dates business existed	
	***************************************	<b></b>	<i>i</i>	A .
	Chicago IL 100	Jermaine Polk	From 10/14 To	Present
	City State ZIP Coo	de C	7	<del></del>
		Describe the nature of the busines	s Employer Identification i	number
	Business Name	**************************************	Do not include Social Se	curity number or ITIN.
			EIN:	
	Number Street	Name of the second		
		Name of accountant or bookkeepe	Dates business existed	
	THE THE STATE OF T		_	
			From To	

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JERMAINE First Name	Middle Name Lest i	POLK	Case number (if known)
		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN
Business Name	——————————————————————————————————————		EIN: -
Number Street		Name of accountant or bookkeeper	Dates business existed
City	State ZIP Code		From To
thin 2 years before		tcy, did you give a financial statement	to anyone about your business? Include all financial
No Yes. Fill in the deta			
		Date issued	
Name		MM / DD / YYYY	
Number Street			
City	State ZIP Code		
12: Sign Below			
nswers are true and	correct. I understand bankruptcy case can	of Financial Affairs and any attachme i that making a false statement, conce result in fines up to \$250,000, or impri	ents, and I declare under penalty of perjury that the caling property, or obtaining money or property by frau isonment for up to 20 years, or both.
Jorman	Pek	<b> x</b>	
Signature of Debtor	1	Signature of Debtor 2	
Date	_ onal pages to <i>Your St</i>	Dateatement of Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
No Yes			<b>.</b>
id you pay or agree t	to pay someone who	is not an attorney to help you fill out t	pankruptcy forms?
	on		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this in	formation to identi	fy your case:		
Debtor 1	JERMAINE		POLK	
	First Name	Middle Name	Lasi Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for th	e: Northern District of III	linois	
Case number				
(If known)		***************************************	Total Control of the	

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Partific List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C	
Creditor's name:	☐ Surrender the property.	☐ No ☐ Yes	
Description of	Retain the property and redeem it.		
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	Surrender the property.	□ No	
	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	Surrender the property.	□ No	
	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
•	Retain the property and [explain]:		

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**JERMAINE POLK** Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: ☐ No Yes Description of leased property: Lessor's name: O No Yes Description of leased property: Lessor's name: ☐ No Description of leased Yes property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: O No Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Part 3 Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 2 MM / DD / YYYY